

**FAUQUIER COUNTY GOVERNMENT AND PUBLIC SCHOOLS  
PROCUREMENT DIVISION**

320 Hospital Drive Ste. 23

Warrenton, Va 20186

Phone: (540) 422-8350

Fax: (540) 422-8355

**NOTICE OF CONTRACT RENEWAL**

DATE: December 1, 2025

COMMODITY NAME: Elevator Inspection & Plan Review Services

CONTRACT NUMBER: Riding Loudoun County RFQ 687

CONTRACT PERIOD: December 1, 2017 through November 30, 2019  
1<sup>st</sup> Renewal: December 1, 2019 through November 30, 2021  
2<sup>nd</sup> Renewal: December 1, 2021 through November 30, 2023  
3<sup>rd</sup> Renewal: December 1, 2023 through November 30, 2025  
4<sup>th</sup> Renewal: December 1, 2025 through November 30, 2027

RENEWAL OPTIONS: Four (4), two-year renewal options

CONTRACTOR: National Elevator Inspection Services, Inc.  
**VN: 630823** 11973 Westline Industrial Dr., Suite 100  
St. Louis, MO 63146  
Attn: Dan Waldrop, AVP, SE Region  
PH: 800-886-6347  
Cell: 404-886-6358  
FX: 314-682-2397

*Billing POC:* Kathy Allen, [Kathryn.allen@us.bureauveritas.com](mailto:Kathryn.allen@us.bureauveritas.com)  
*Services POC:* Theresa Klein, [Theresa.klein@us.bureauveritas.com](mailto:Theresa.klein@us.bureauveritas.com)

TERMS: Net 30 days

FOR FURTHER INFORMATION CONTACT: Jeffrey Campbell  
Procurement Officer III  
PH (540) 422-8350  
[Jeffrey.campbell@fauquiercounty.gov](mailto:Jeffrey.campbell@fauquiercounty.gov)

NOTICE TO ALL FAUQUIER COUNTY GOVERNMENT AND PUBLIC SCHOOL USING

DEPARTMENTS: This contract is the result of a competitive bid program and its use must follow the FCG&PS Procurement Policy/Procedures for the purchase of the commodity listed herein. Please see the reverse side of this notice for further instructions regarding this contract.

## INSTRUCTIONS

1. Orders: All FCG&PS Using Departments must order services listed by issuing FCG&PS Purchase Orders per FCG&PS Procurement Procedures Manual. An extra copy of the Procedures Manual can be obtained by calling Procurement at (540) 422-8351 or 8352.
2. The applicable contract number, vendor number, estimated total dollar amount (can be done as a “Not to exceed” estimated figure), contact person with phone number, and billing/delivery address must be shown on each purchase order for Finance & Contractor use.
3. Inspection of services provided and approval of contractor’s invoice is the responsibility of the receiving using department.
4. Any complaint as to quality of service, faulty or delinquent delivery, or violation of contract provisions by contractor shall be reported to FCG&PS Procurement for handling with the Contractor. All complaints must be submitted in writing and can be forwarded to Procurement via email, fax or courier.
5. Renewals: As stated on the face of this notice, four (4) two-year renewals exist on this contract. The decision as to whether to exercise the renewal option will be made by the Contract Officer, with input requested from FCGPS Using Departments, before the expiration of the current term, but after Loudoun County has exercised their renewal option.
6. Pricing: See attached. (*Riding Loudoun County RFQ 687*)

## CONTRACT AMENDMENT #5

This Agreement constitutes an amendment to Contract RFQ 687 for Elevator Inspection and Plan Review Services between the **COUNTY OF LOUDOUN, VIRGINIA** (“County”) and **BUREAU VERITAS NATIONAL ELEVATOR INSPECTIONS SERVICES, INC.** (“Contractor”) (collectively, the “parties”).

In consideration of the mutual covenants set forth herein, the parties agree to amend and modify the Contract effective December 1, 2025 as follows:

### 2.2 Term

The Contract will be renewed for the period of December 1, 2025 through November 30, 2027. There are no renewal periods remaining on this Contract.

Section 2.26 Notices is deleted in its entirety and replaced with the following:

### 2.26 Notices

All notices and other communications hereunder shall be deemed to have been given when made in writing and either (a) delivered in person, (b) delivered to an agent, such as an overnight or similar delivery service, or (c) deposited in the United States mail, postage prepaid, certified or registered, addressed as follows:

#### **TO CONTRACTOR:**

Bureau Veritas National Elevator  
Inspections Services, Inc.  
11971 Westline Industrial Drive  
Suite 108  
St. Louis, Missouri 63146

#### **TO COUNTY:**

County of Loudoun, Virginia  
Division of Procurement  
Attn: Heather DeHaven  
**Via delivery method (a) or (b)**  
1 Harrison Street, SE, 1st Floor  
Drop Box labeled  
**“Procurement Bids and Proposals”**  
Leesburg, Virginia 20175

**Or**

**Via delivery method (c)**  
P.O. Box 7000  
Leesburg, Virginia 20177-7000

Public access to County facilities is extremely limited. The mailing or delivery by an agent of notice is preferred. However, if a notice is hand delivered, it will be received in the lobby of 1 Harrison Street, SE, Leesburg, Virginia 20175 ONLY in the **Drop Box labeled: Procurement Bids and Proposals between the hours of 8:30 a.m. and 5:00 p.m.**

Notice is deemed to have been received: (i) on the date of delivery if delivered in person; (ii) on the first business day after the date of delivery if sent by same day or overnight courier service; or (iii) on the third business day after the date of mailing, if sent by certified or registered United States Mail, return receipt requested, postage and charges prepaid.

See **Exhibit III**, attached and incorporated herein.


**3.0 COMPENSATION**

Compensation shall be replaced in its entirety with the attached and incorporated "**REVISED ATTACHMENT #1 - PRICING**", dated December 1, 2025. This attachment replaces the pricing on **REVISED ATTACHMENT #1 - PRICING**, dated December 1, 2023.

In all respects not specifically mentioned or altered by Amendment, the original Contract shall remain in full force and effect.

**COUNTY OF LOUDOUN, VIRGINIA**

Division of Procurement  
1 Harrison Street, S.E.  
Leesburg, VA 20175  
Phone: (571) 627-7430  
Fax: (703) 771-5097

By: 

Name: Heather DeHaven, NIGP-CPP, CPPB

Title: Senior Contracting Officer

Date: November 26, 2025

**BUREAU VERITAS NATIONAL ELEVATOR INSPECTIONS SERVICES, INC.**

11971 Westline Industrial Drive, Suite 108  
St. Louis, MO 63146  
Phone: (314) 682-2616  
Fax: (314) 682-2397

By: 

Name: Robert Stuart

Title: President

Date: 11/26/2025

**APPROVED AS TO FORM:**

By: 

Tina P. Estevao  
Senior Assistant County Attorney

# REVISED ATTACHMENT #1 – PRICING

December 1, 2025

SERVICE DESCRIPTION	UNIT	UNIT PRICE
Plans Review	EA	\$ 46.90
Inspection – Acceptance Test for New Installation	EA	\$ 290.10
Re-Inspection – New Installations	EA	\$ 53.44
Re-Inspection – Existing Installations	EA	\$ 33.81
Routine Inspection – Every 12 months	EA	\$ 136.32
Periodic Inspection – Every 6 months	EA	\$ 53.44
3-year Inspection and Testing	EA	\$ 58.89
5-year Inspection and Testing	EA	\$ 211.57
Testing without Routine Inspection	EA	\$ 75.25
<b>Labor Rate</b>		
Regular Time – Investigations, Legal Proceedings, etc.	HR	\$ 1.09
Overtime – Emergency Response (per Section 5.6)	HR	\$ 1.09

## EXHIBIT III



September 9, 2025

Ms. Heather DeHaven  
Senior Contracting Officer  
County of Loudoun, Virginia  
Department of Finance & Procurement  
1 Harrison St, SE, 4th Floor  
Leesburg, VA 20175

Ref.: Request for Amendment to Contract RFQ 687 – Section 2.26 update

Dear Ms. DeHaven,

Our business address for formal contractual communications and issuance of purchase orders has changed as follows:

11971 Westline Industrial Dr. Suite 108  
St. Louis, MO 63146

We appreciate your assistance to update Section 2.26 Notices of the contract in reference via amendment. In addition BVNEIS respectfully requests the Consumer Price Increase adjustment as stipulated by the base agreement.

Thank you for your time and assistance. Please let us know if you require additional information to proceed.

Sincerely,

Robert Stuart  
President

**Bureau Veritas National Elevator Inspection Services, Inc.**

11971 Westline Industrial Drive, Suite 108  
St. Louis, MO 63146

Main: (800) 886-6347  
[www.bvna.com/vte](http://www.bvna.com/vte)

# Request for Taxpayer Identification Number and Certification

Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

**Give form to the  
requester. Do not  
send to the IRS.**

**Before you begin.** For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

<b>Print or type. See Specific Instructions on page 3.</b>	<b>1</b> Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	<b>Bureau Veritas National Elevator Inpection Services Inc</b>	
	<b>2</b> Business name/disregarded entity name, if different from above.	
	<b>3a</b> Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.	
	<input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ <b>Note:</b> Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	<b>3b</b> If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>	
<b>5</b> Address (number, street, and apt. or suite no.). See instructions.		
<b>11971 Westline Industrial Drive Suite 108</b>		
<b>6</b> City, state, and ZIP code		
<b>St. Louis, MO 63146</b>		
<b>7</b> List account number(s) here (optional)		
Requester's name and address (optional)		

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>									
<b>or</b>									
<b>Employer identification number</b>									
7	6	-	0	8	3	1	9	9	9

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person <i>Diane Walker</i>	Date <b>01/06/2025</b>
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they